

Exhibit 2

UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA
Civil Division

THERESA M. OWENS

Plaintiff,

v.

ELI LILLY AND COMPANY

Defendant.

Civil Action No. 03-CV-01798 (EGS)

**PLAINTIFF THERESA M. OWENS' ANSWERS TO
DEFENDANT ELI LILLY AND COMPANY'S FIRST SET OF INTERROGATORIES**

1. Please state your full legal name, your social security number and your date and place of birth, including the name and address of the hospital at which you were born, if any. If you have ever been known by any other name or names, please state each such name and when each such other name was used.

ANSWER: a. Theresa M. Owens
b. SS # 034-48-2342
c. DOB: 2/18/63
d. St. Margaret's Hospital, Dorchester, MA
e. Theresa M. Kelley, 2/18/63 - 10/28/89

2. Please state your present residential address and all former residential addresses and the inclusive dates for each.

ANSWER: a. 147 Beechnut Rd
Westwood, MA 02090
6/91 - present
b. 147 West Sixth Street
South Boston, MA 02127
10/89 - 6/91

c. 31 Druid Street
Mattapan, MA 02126

5/70 - 10/89

d. 15 Groveland St.
Mattapan, MA 02126

2/18/63 - 5/70

3. Please state your marital status. If married, please state your spouse's full legal name, his residential address and the date of your marriage. If formerly married, for each spouse, please state his full legal name, his present residential address, the date of your marriage, the date of its termination, and the method by which it was terminated (e.g., annulment, divorce, death of spouse).

ANSWER: a. Married
b. Robert K. Owens
c. 147 Beechnut Rd., Westwood, MA 02090
d. 10/28/89

4. Please state the full legal name of each of your parents, including your mother's maiden name, their places and dates of birth and their current residential address or addresses. If either of your parents is deceased, please state the date, place and cause of death.

ANSWER: a. Mother: Patricia Kelley
I. Patricia Brennan
ii. 1/10/35
iii. Boston, MA
iv. 31 Druid St., Dorchester, MA 02126
b. Father: Paul Kelley
I. 8/1/27
ii. Boston, MA
iii. 31 Druid St., Dorchester, MA 02126

5. Please state the address of each residence of your mother for the period beginning five years prior to the date of birth of your mother's first child through the present.

ANSWER: a. 569 River Street
Mattapan, MA 02126

1956 - 9/59

b. 15 Groveland St.
Mattapan, MA 02126

9/59 - 5/70

c. 31 Druid St.
Mattapan, MA 02126

5/70 - present

6. If you contend that your mother took diethylstilbestrol ("DES" or "stilbestrol") during her pregnancy with you, please state the name and address of each physician who prescribed it; if any physician who prescribed DES is deceased, please state the name and address of the current custodian of his or her medical records; and please state the purpose for which the drug was prescribed.

ANSWER: a. Drs. Robert Keough and Edward Carey, Coddington St., Quincy, MA.

b. Custodian of medical records unknown

c. DES was prescribed to prevent miscarriage

7. Please identify, by name and address, each pharmacy or other supplier that dispensed the DES allegedly ingested by your mother while pregnant with you. If you do not know the name of the pharmacy, please state the name and address of each pharmacy or retail drug outlet that was patronized by your mother or father during the twelve months that preceded your birth.

ANSWER: McDonough Drug, Dorchester Ave., Dorchester, MA.

8. Describe in detail the physical appearance of the diethylstilbestrol you allege your mother ingested, including its form (for example, pill, injection, capsule), the shape, color, or size of any pill, tablet or capsule, the dosage of the DES your mother took, and any markings that may have appeared on the product.

ANSWER: small, uncoated, round, white pills with a cross-score and no additional

markings.

9. Please set forth all information you have concerning the identity of the manufacturer or supplier of the DES your mother allegedly ingested while pregnant with you. State all facts upon which you base this identification, including, if known, but not limited to, the trade, generic, or brand name of the DES you allege your mother ingested. Identify by name and address all witnesses with personal knowledge of these facts.

ANSWER: Statement of Patricia Kelley. Marketing materials such as PDR, Matrix, Pill Identification Tables. Lilly wholesaler documents. Plaintiff reserves the right to supplement this Answer as discovery progresses.

10. Please state the date on which you first believed that your mother took DES during her pregnancy with you, the date you first discovered any injury you claim to be due to your exposure to DES, and the date you first believed that DES manufacturers in general or any DES manufacturer in particular acted in any way wrongly, negligently or tortuously in the manufacture or distribution of DES or in the warnings about the use of DES.

ANSWER: a. Plaintiff first believed that her mother took DES in approximately 1981.

b. In 1993, Plaintiff was advised by Dr. Merle Berger that in utero DES exposure might have had some effect on the development of her reproductive tract. The nature and consequences of this effect were unknown and vague. Plaintiff did not consider this effect an injury as such and continued to attempt pregnancy. Plaintiff suffered no pain, needed no treatment to correct this effect, and did not realize she was debilitated. Plaintiff had no information, suggestion, hunch, or inkling that the manufacturer's conduct in testing or promoting this drug was wrongful or that the drug was unreasonably dangerous until November 2002.

c. November 2002 was the first date Plaintiff believed that DES manufacturers in general or any DES manufacturer in particular acted in

any way wrongly, negligently, or tortuously in the manufacture or distribution of DES or in the warnings about the use of DES.

11. Please state the names and last known addresses of any attorneys with whom you have discussed or exchanged information regarding your injuries, DES in general, or Lilly. State the approximate dates of each such discussion or exchange of information.

ANSWER: None, other than my present attorneys who were retained in November, 2002.

12. Please state the number of pregnancies that your mother has had, and for each such pregnancy that your mother has had, please state the approximate date the pregnancy began; the name and address of each physician, clinic, hospital or other health care professional or facility who treated your mother during that pregnancy; the identities of any drugs prescribed to or taken by your mother during that pregnancy; the approximate date the pregnancy ended; the method by which the pregnancy ended (e.g., spontaneous abortion, voluntary abortion, stillborn delivery, live birth); and if the pregnancy ended in a live birth, the name of the child and his or her present residential address.

ANSWER: Plaintiff's mother has had five pregnancies as follows:

- a. Paul G. Kelley - LMP approx. 2/14/61, Dr. Robert Keough and Dr. Edward Carey, Coddington St., Quincy, MA. DES was prescribed during this pregnancy. Live birth, 11/1/61 at St. Margaret's Hospital, Dorchester, MA. Current address is 399 Old Farm Road, Hanover, MA 02339.
- b. Theresa Owens - LMP approx. 5/13/62, Dr. Robert Keough and Dr. Edward Carey, Coddington St., Quincy, MA. DES was prescribed during this pregnancy. Live birth, 2/18/63, St. Margaret's Hospital, Dorchester, MA. Current address is 147 Beechnut Rd, Westwood, MA 02090.
- c. Sheila A Roake - LMP approx. 1/ 21/64, Dr. Robert Keough and Dr. Edward Carey, Coddington St., Quincy, MA. DES was prescribed during this pregnancy. Live birth, 10/7/64, St. Margaret's Hospital, Dorchester, MA. Current address is 5 Norwell St., Norfolk, MA 02056.
- d. Thomas J. Kelley - LMP approx. 8/24/65, Dr. Robert Keough and Dr. Edward Carey, Coddington St., Quincy, MA. Live birth, 5/31/66, St. Margaret's Hospital, Dorchester, MA. Current address is 19 Adams Rd., Walpole, MA 02081.
- e. Kevin M. Kelley - LMP approx. 8/1/69, Dr. Robert Keough and Dr. Edward Carey, Coddington St., Quincy, MA. Live birth, 5/7/70, St.

Margaret's Hospital, Dorchester, MA. Current address is 31 Druid St., Mattapan, MA 02126.

13. Please describe in detail each and every physical or emotional injury you claim to have experienced as a result of exposure to DES and for each such injury, please state the date of its diagnosis; identify by name and address each health care provider (e.g., physician, psychiatrist, psychologist, clinic, hospital, other health care or mental health professional or facility) that has examined, diagnosed or treated you, or been consulted with regard to each such injury; and describe in detail the treatment rendered by each such health care provider.

- ANSWER:**
- a. T-shaped hypoplastic uterus, diagnosed in January 1993 by Dr. Merle Berger, Boston IVF, Brookline, MA.
 - b. Primary infertility, diagnosed in approximately 1993 by Dr. Merle Berger, Brookline, MA.
 - c. Diminished sex life
 - d. Diminished self-esteem and sense of powerlessness due to inability to procreate
 - e. Impaired relationships with friends and relatives who have healthy children
 - f. Anger and resentment that reproductive potential is damaged
 - g. Impaired relationships with friends and relatives who have healthy children
 - h. Anger and resentment that reproductive potential is damaged
 - I. Inability to fulfill biological destiny
 - j. Relationship with spouse complicated by anger, resentment, and disappointment
 - k. Difficulty participating in social activities with other parents
 - l. Feelings of being punished, self-hatred, inadequacy, and inferiority

m. Depression

14. Please identify by name and address each physician, psychiatrist, psychologist, clinic, hospital or other health care or mental health professional or facility that has rendered any medical examination, diagnosis, consultation, advice or treatment to you for any health problem, emotional problem or injury other than those which you allege are related to diethylstilbestrol.

ANSWER: Plaintiff objects to this Interrogatory as overly broad, burdensome and irrelevant, nor will it lead to the discovery of any relevant information pertaining to Plaintiff's claims. In addition, Plaintiff objects to any health care provider not relevant to her gynecological or associated conditions. Without waiving said objection, the following have provided GYN consultation and/or examinations:

- a. Dr. Ann Goulart
300 Congress St.
Quincy, MA 02169
- b. Dr. Merle Berger
Boston IVF
One Brookline Place
Brookline, MA
- c. Neponset Health Center
398 Neponset Ave.
Dorchester, MA

15. Please state the number of pregnancies that you have had and for each pregnancy, please state the approximate date the pregnancy began; the name and address of each health care provider (e.g., physician, clinic, hospital or other health care professional or facility) who examined or treated you during your pregnancy; the approximate date the pregnancy ended; the method by which the pregnancy ended (e.g., live birth, spontaneous abortion, voluntary abortion, stillborn delivery); and, if the pregnancy ended in a live birth, the name of the child and his or her present residential address.

ANSWER: Plaintiff has been diagnosed with primary infertility and therefore has never been pregnant.

16. Please state all means (including, without limitation, natural conception, IUI, and IVF) through which you have attempted pregnancy, including the date ranges of these attempts; and identify by name, address, and date range each partner with whom you made such attempts.

ANSWER: See Plaintiff's medical records.

17. Please identify by name, address, and date(s) of treatment each physician, clinic, hospital, or other health care provider that has rendered any medical examination, diagnosis, consultation, advice or treatment to you in connection with your attempts at pregnancy.

ANSWER: See Plaintiff's Answer to Interrogatory No. 14.

18. If you claim to have suffered or claim you will suffer a loss of earnings as a result of the injuries alleged, state from whom such earnings would have been payable, the total amount of the alleged loss and state any amounts for which you have been reimbursed, and by whom, for loss of earnings as a result of the injuries alleged.

ANSWER: Plaintiff is not making a claim for loss of earnings at this time.

19. State separately the total amounts, including future amounts, if any, claimed by you as special damages for: (a) services provided by any health care or mental health care provider (including, without limitation, physicians, psychiatrists, psychologists, teachers, rehabilitation therapists, physical therapists, occupational therapists, speech therapists, counselors, social workers and nurses); (b) hospital services; and c) medical supplies.

ANSWER: A listing of Plaintiff's Special Damages will be forwarded upon receipt and compilation.

20. Please state the full name, present address, area of expertise and professional training of each person expected to testify as an expert witness at trial, state the subject matter on which the expert is expected to testify, state the substance of the findings and the opinions to which the expert is expected to testify, provide a summary of the grounds for each opinion and identify any and all written reports made by each such expert concerning his or her findings and opinions.

ANSWER: Plaintiff has not decided upon her experts, but is considering calling the following:

- a. Harris Busch, M.D., Ph.D.
Baylor Department of Pharmacology
1 Baylor Plaza, Room 319D
Houston, TX 77030

Dr. Busch is an expert in the field of Pharmacology and Toxicology, and is expected to testify as to the state of the art. Specifically, Dr. Busch will testify that Lilly failed to adequately

test for the safety of DES.

- b. Dr. Merle Berger
Boston IVF
One Brookline Place
Brookline, MA

Dr. Berger is an expert in the field of Obstetrics and Gynecology and Reproductive Endocrinology, and is expected to testify that Plaintiff's exposure in utero caused her uterine and reproductive anomalies and infertility. In addition, Dr. Berger is expected to testify as to Plaintiff's prognosis, and any medical and/or surgical treatment required for same.

- c. Daniel M. Sheehan, Ph.D.
1422 Scott Street
Little Rock, Arkansas 72202

Dr. Sheehan is an expert in the field of Toxicology. He is expected to testify as to the standard of care of the pharmaceutical industry in the employment of toxicological information gleaned from animal testing and will testify that said standard of care was violated by the defendant in its initial and then afterward promotion of DES for use in pregnancy.

- d. Brian Strom, M.D., MPH
University of Pennsylvania Medical Center
Department of Epidemiology and Biostatistics
824 Blockley Hall, 423 Guardian Drive
Philadelphia, PA 19104-6021

Philip Cole, M.D., M.P.H.
University of Alabama Medical School
Ryals School of Public Health
1665 University Boulevard
Birmingham, AL 35294

Drs. Strom and Cole are experts in the field of Epidemiology and are expected to testify that Plaintiff's reproductive tract and anatomic anomalies are causally related to her in utero DES exposure and placed her at high risk for poor pregnancy outcomes, infertility, and

pre-term delivery.

21. Please identify all other persons having personal knowledge of any of the facts bearing on your claim, and for each such person state his or her address, telephone number and relationship to you, if any.

ANSWER: None, other than those persons previously aforementioned. Plaintiff reserves the right to supplement this Answer as discovery progresses.

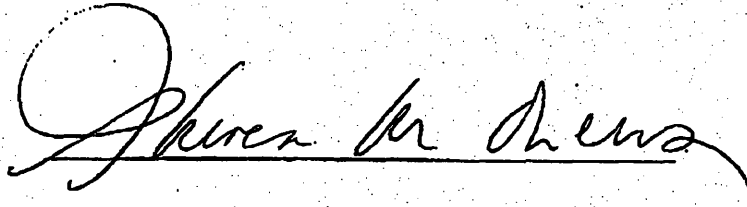
22. If your attorney, or any one acting on your behalf, has obtained statements in any form from any person concerning any of the events that occurred in regard to the facts alleged in your Complaint, please identify the person or persons who took the statement; identify the person currently in custody of the statement; and state whether the statement was oral or written, and, if oral, whether and in what manner it was recorded.

ANSWER: My attorneys are in possession of statements from Dr. Merle Berger and Patricia Kelley. Plaintiff reserves the right to supplement this Answer as discovery progresses.

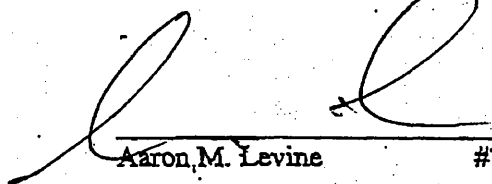
The information contained in these answers as well as the word usage, sentence structure and opinions, are not solely that of the declarant, rather they are the product of counsel in preparation with declarant.

I SOLEMNLY DECLARE AND AFFIRM UNDER THE PENALTY OF PERJURY THAT THE INFORMATION CONTAINED IN THE FOREGOING ANSWERS TO INTERROGATORIES ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Dated: Oct. 14, 2003



AARON M. LEVINE & ASSOCIATES



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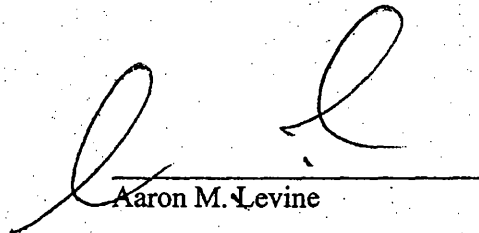
Counsel for Plaintiff

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 23rd Day of October, 2003, a true and correct copy of the foregoing Plaintiff Theresa OWENS' ANSWERS to Defendant Eli Lilly and Company's First Set of Interrogatories was served via first class, postage prepaid, U.S. Mail, on counsel for Defendant:

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